

2. STATE

OHIO

4. PROPOSED EFFECTIVE DATE
December 1, 2004

FORM HCFA-179 (07-92)

Name and address of State Administering Agency, if different from the State Medicaid Agency.
The Ohio Department of Aging, 50 W. Broad Street, 8th Floor, Columbus, Ohio 43215

I. Eligibility

The State determines eligibility for PACE enrollees under rules applying to community groups.

A. X The State determines eligibility for PACE enrollees under rules applying to institutional groups as provided for in section 1902 (a)(10)(A)(ii)(VI) of the Act (42 CFR 435.217 in regulations). The State has elected to cover under its State plan the eligibility groups specified under these provisions in the statute and regulations. The applicable groups are: 42 CFR 435.121 Aged, Blind, Disabled

(If this option is selected, please identify, by statutory and/or regulatory reference, the institutional eligibility group or groups under which the State determines eligibility for PACE enrollees. Please note that these groups must be covered under the States's Medicaid plan.)

B. _____ The State determines eligibility for PACE enrollees under rules applying to institutional groups, but chooses not to apply post-eligibility treatment of income rules to those individuals. (If this option is selected, skip to II-Compliance and State Monitoring of the PACE Program.)

C. X The State determines eligibility for PACE enrollees under rules applying to institutional groups, and applies post-eligibility treatment of income rules to those individuals as specified below. Note that the post-eligibility treatment of income rules specified below are the same as those that apply to the State's approved HCBS waiver(s).

Regular Post Eligibility

1. _____ SSI State. The State is using the post-eligibility rules at 42 CFR 435.726.
Payment for PACE services is reduced by the amount remaining after deducting the following amounts from the PACE enrollee's income

TN No. 04-013
Supersedes
TN No. 02-011

Approval Date MAR 2 2005 Effective Date _____